

STATE OF NEW HAMPSHIRE

2016 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

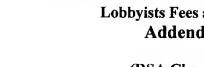
I. Name of Lobb	yist(s) Li.~	dsay	Hamr	ncic	······	· · · · · · · · · · · · · · · · · · ·		
II. Name of lobb	yist's partnershi	ip, firm or c	corporation,	if any:				
The H	lumane (Name of partners)	Socie	orporation)	the	United	States	(HSUS	7
PO B Business Address:	ox 3442	<u>></u>	Con	ord	^	1H	05302	ı =
Business Address:	(Street)		(Town/Cit	y)	(Sta	ite)	(Zip Code	5
(603 <u>401-</u> (Telepho	0287 one)	()	(Fax)	e-mail	lhamne	k@hyn	nanesociet
III. This stateme reportable expen						R you may fi	le a separate r	eport for
☐ All reportable	e transactions occ	urring in the	e months pric	or to the re	porting date rel	ative to the fo	llowing client:	
	(Full Name	of Client as i	it appears on the	he Lobbyist	Registration For	rm)		
OR ☐ All reportable unrelated to any p		he lobbyist ((including the	e lobbyist'	s family), or th	e lobbying fir	m listed below	which are
IV. Date of Repo	ort April 27, activity from date		on to 3/31/16	act	July 27, 201 ivity from 4/1/16			
		27, 2016 🛭 7/1/16 to 9/3	0/16	ac	January 25, tivity from 10/1/			
V. There have If this box is chec Concord, NH 033	ked, complete jus							□ 204,
VI. Check if add	litional reports a	re attached	l: itures, you m	ust file Ac	ldendum A– F	ees and Exper	nses	
☐ If you have p Expense Reimbur	aid an honorariu							is or
☐ If you, your i	firm, or your fam	ily has made	e political cor	ntributions	, you must file	Addendum (C– Political Cor	ntributions
Sworn Statemen I have read RSA and complete to t	15, RSA 15-B, R he best of my kno	SA 14-C an owledge and	l belief.	and hereby	swear or affirn	n that the fore	going informati	ion is true
(Signature of lob	y tan byist)	rick			7	(Date)		
Lindso	ay Ham	nce					K	ECEIVED
(Print Name of le	obbyist)		, 1 Manage				0	CT 2 4 2017

NEW HAMPSHIRE DEPARTMENT OF STATE

E S E R T

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A



(RSA Chapter 15:6)

I. Name of Lobbyist(s) Lodsay Hamnek	
II. Name of lobbyist's partnership, firm or corporation, if any:	
(Name of partnership, firm or corporation)	-col States (HSUS)
III. Name of Client HSUS	Date 7 6 17
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greened reduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a) \$
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ ear)
c) Total of all fees received to date (Add lines a and b)	c) \$
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of the Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lessing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm. e aggregate total of all expenses paid expenses; (b) the aggregate total of all le: meals purchased during a business ss than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 for ue of greater than \$25, purchase of a er than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a)\$ 4275.30
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
a) Total of all itemized expenditures reported in detail in section VI	as Ō

d) Total expenses for this reporting period (Add lines a, b and c)	d)\$ 9213.34
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e)\$ 5443.91
f) Total of all expenses year to date	ns 9719.27
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
\mathcal{O} . (
(Signature of lobbyist)	7 6 17 (Data)
(Signature of foodyist)	(Date)
Lindsay Harrick (Print Name of lobbyist)	
(Fille Name of 1000yist)	